

Application Data Sheet

Application Information

Application Type::	Regular
Subject Matter::	Utility
Suggested Classification::	
Suggested Group Art Unit::	
CD-ROM or CD-R?::	None
Number of CD disks::	
Number of Copies of CDs::	
Sequence Submission?::	None
Computer Readable Form (CRF)::	No
Number of copies of CRF::	0
Title::	METHOD OF ALLOCATING SEATS TO CUSTOMERS IN A COMPUTER RESERVATION SYSTEM
Attorney Docket Number::	0518-1080-1
Request for Early Publication?::	No
Request for Non-Publication?::	No
Suggested Drawing Figure::	
Total Drawing Sheets::	
Small Entity?::	No
Latin Name::	
Variety Denomination Name::	
Petition Included?::	No
Petition Type::	
Licensed US Gov't Agency::	
Contract or Grant Numbers::	
Secrecy Order in Parent	No
Appl.?::	

**Applicant Information**

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: FRANCE  
Status:: Full Capacity  
Given Name:: OLIVIER  
Middle Name::  
Family Name:: FAVOREL  
Name Suffix::  
City of Residence:: NICE  
State or Province of  
Residence::  
Country of Residence:: FRANCE  
Street of Mailing OFFICE MEDITERRANEEN DE BREVETS  
Address:: D'INVENTION ET DE MARQUES  
CABINET HAUTIER, 24 RUE MASSENA  
City of Mailing Address:: NICE  
State or Province of Mailing Address::  
Country of Mailing Address:: FRANCE  
Postal or Zip Code of Mailing Address:: 06000

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: AUSTRALIA  
Status:: Full Capacity  
Given Name:: DAVID  
Middle Name::  
Family Name:: HASSAN  
Name Suffix:: NICE  
City of Residence::  
State or Province of  
Residence::  
Country of Residence:: FRANCE  
Street of Mailing OFFICE MEDITERRANEEN DE BREVETS  
Address:: D'INVENTION ET DE MARQUES

CABINET HAUTIER, 24 RUE MASSENA

City of Mailing Address::

State or Province of Mailing Address::

Country of Mailing Address:: FRANCE

Postal or Zip Code of Mailing Address:: 06000

Applicant Authority Type:: Inventor

Primary Citizenship Country:: FRANCE

Status:: Full Capacity

Given Name:: EMILIO

Middle Name::

Family Name:: VIZZARI

Name Suffix::

City of Residence:: NICE

State or Province of  
Residence::

Country of Residence:: FRANCE

Street of Mailing  
Address:: OFFICE MEDITERRANEEN DE BREVETS  
D'INVENTION ET DE MARQUES

CABINET HAUTIER, 24 RUE MASSENA

City of Mailing Address:: NICE

State or Province of Mailing Address::

Country of Mailing Address:: FRANCE

Postal or Zip Code of Mailing Address:: 06000

#### Correspondence Information

Correspondence Customer 00466

Number::

#### Representative Information

Representative Customer

00466

Number::

**Domestic Priority Information**

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This application	National Stage of	PCT/FR2003/050011	6/13/03
PCT/FR2003/050011	An application claiming the benefit under 35 USC 119(e)	60/444,693	2/4/03

**Foreign Priority Information**

Country::	Application Number::	Filing Date::	Priority Claimed::
FRANCE	0208243	7/2/02	Yes

**Assignment Information**

Assignee Name:: AMADEUS S.A.S.  
Street of Mailing 485 ROUTE DU PIN MONTARD  
Address:: SOPHIA ANTIPOLIS  
City of Mailing Address:: BIOT  
State or Province of Mailing Address::  
Country of Mailing Address:: FRANCE  
Postal or Zip Code of Mailing Address:: 06410